

# REQUEST FOR RENEWAL OF TERM AGREEMENT

Consultant: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

The above named firm/individual is requesting renewal of the 2003 – 2005 Term Agreement for an additional two years. We understand that this renewal covers only those categories of service listed in the 2003 – 2005 Term Agreement. We also acknowledge that if we do not already have current financial information (certified wage rates and overhead rates) on file with the Department, that information will be required prior to any agreement being negotiated.

☐ Mark this box if a separate proposal is being submitted to add new categories of service.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***This Request for Renewal must be submitted no later than November 9, 2004, and must include a signed Certification regarding Debarment, Suspension, and Other Responsibility Matters. That form can be downloaded from the following web site: <http://www.itd.idaho.gov/design/cau/forms.htm>***